

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 6
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Conservatives Fund			FEC IDENTIFICATION NUMBER ▼ C C00448696		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			M M M / D D D / Y Y Y Y Y Y		
Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 25 / 2015		
Mailing Address PO Box 388			Amount 109.95		
City Alexandria		State VA	Zip Code 22313-0388		
Purpose of Expenditure IE-Lee-Online Processing		Category/Type		Transaction ID : EDD5595B5F2AA479D862 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 25 / 2015	
Name of Federal Candidate Mike Lee			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: UT		
Calendar Year-To-Date Per Election for Office Sought			68998.05 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015		
Mailing Address PO Box 388			Amount 75.70		
City Alexandria		State VA	Zip Code 22313-0388		
Purpose of Expenditure IE-Lee-Mail Processing		Category/Type		Transaction ID : EAA75208A0DF94486A3C Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015	
Name of Federal Candidate Mike Lee			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: UT		
Calendar Year-To-Date Per Election for Office Sought			69327.35 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			185.65		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Paul Kilgore</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 05 / 26 / 2015		